

RECEIVED

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

Date Received
MAR 26 REC'D
2013
CITY CLERK

Please type or print in ink.

NAME OF FILER

JOHNSON

(LAST)

BY

APR 08 2013

BEN

(FIRST)

SR

(MIDDLE)

1. Office, Agency, or Court

Agency Name

CITY OF PITTSBURG

Division, Board, Department, District, if applicable

COUNCIL

Your Position

COUNCILMEMBER

► If filing for multiple positions, list below or on an attachment.

Agency: TRI DELTA TRANSIT

Position: ALT. MEMBER

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ Multi-County

☒ City of PITTSBURG

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☒ County of CONTRA COSTA

☐ Other

3. Type of Statement (Check at least one box)

☒ **Annual:** The period covered is January 1, 2012, through December 31, 2012.

-or-

The period covered is _____, through December 31, 2012.

☐ **Assuming Office:** Date assumed _____

☐ **Leaving Office:** Date Left _____
(Check one)

☐ The period covered is January 1, 2012, through the date of leaving office.

☐ The period covered is _____, through the date of leaving office.

☐ **Candidate:** Election year _____ and office sought, if different than Part 1: _____

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: _____

☐ **Schedule A-1 - Investments** – schedule attached

☐ **Schedule A-2 - Investments** – schedule attached

☒ **Schedule B - Real Property** – schedule attached

☐ **Schedule C - Income, Loans, & Business Positions** – schedule attached

☐ **Schedule D - Income - Gifts** – schedule attached

☐ **Schedule E - Income - Gifts - Travel Payments** – schedule attached

-or-

☐ **None** - No reportable interests on any schedule

herein and in any attached schedules is true and complete. I acknowledge

I certify under penalty of perjury under the laws of the State of California

Date Signed 03/26/2013

(month, day, year)

COVER PAGE

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
JOHNSON BEN

1. Office, Agency, or Court

Agency Name

CONTRA COSTA TRANSIT AUTHORITY (CCTA)

Division, Board, Department, District, if applicable

BOARD

Your Position

MEMBER

► If filing for multiple positions, list below or on an attachment.

Agency: _____ Position: Member,

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☐ Multi-County _____

☒ County of CONTRA COSTA

☒ City of PITTSBURG

☒ Other _____

3. Type of Statement (Check at least one box)

☒ **Annual:** The period covered is January 1, 2012, through December 31, 2012.

☐ **Leaving Office:** Date Left ____/____/_____
(Check one)

-or-

The period covered is ____/____/_____, through December 31, 2012.

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☐ **Assuming Office:** Date assumed ____/____/_____

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Check applicable schedules or "None."

► Total number of pages including this cover page: _____

☐ **Schedule A-1 - Investments** – schedule attached

☐ **Schedule C - Income, Loans, & Business Positions** – schedule attached

☐ **Schedule A-2 - Investments** – schedule attached

☐ **Schedule D - Income – Gifts** – schedule attached

☒ **Schedule B - Real Property** – schedule attached

☐ **Schedule E - Income – Gifts – Travel Payments** – schedule attached

-or-

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JOHNSON BEN

1. Office, Agency, or Court

Agency Name

TRI DELTA TRANSIT

Division, Board, Department, District, if applicable

BOARD

Your Position

MEMBER

► If filing for multiple positions, list below or on an attachment.

Agency: ABAG, HCP,

Position: Alt. Member, Alt. Member, Member, Alt mem

2. Jurisdiction of Office (Check at least one box)

☐ State

☒ Multi-County KERN

☒ City of PITTSBURG

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☒ County of CONTRA COSTA

☒ Other ABAG ASSOCIATED BAY AREA GOVT.

3. Type of Statement (Check at least one box)

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-or-

The period covered is ____/____/____, through December 31, 2012.

☐ Assuming Office: Date assumed ____/____/____

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(Check one)

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4. Schedule Summary

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☐ Schedule A-1 - Investments - schedule attached

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NAME OF FILER (LAST) (FIRST) (MIDDLE)
JOHNSON BEN

1. Office, Agency, or Court

Agency Name

ASSOCIATED BAY AREA GOVERNMENTS (ABAG)

Division, Board, Department, District, if applicable

BOARD

Your Position

MEMBER

► If filing for multiple positions, list below or on an attachment.

Agency: _____ Position: _____

2. Jurisdiction of Office (Check at least one box)

☐ State

☒ Multi-County _____

☒ City of PITTSBURG _____

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☒ County of CONTRA COSTA _____

☐ Other _____

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(Check one)

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4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 2

☐ Schedule A-1 - Investments - schedule attached

☐ Schedule A-2 - Investments - schedule attached

☒ Schedule B - Real Property - schedule attached

☐ Schedule C - Income, Loans, & Business Positions - schedule attached

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☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

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(month, day, year)

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NAME OF FILER (LAST) (FIRST) (MIDDLE)
JOHNSON BEN

1. Office, Agency, or Court

Agency Name

HIGH DESERT POWER AUTHORITY

Division, Board, Department, District, if applicable

BOARD

Your Position

PRESIDENT

► If filing for multiple positions, list below or on an attachment.

Agency: _____ Position: _____

2. Jurisdiction of Office (Check at least one box)

☐ State

☒ Multi-County KERN

☒ City of PITTSBURG

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☒ County of CONTRA COSTA

☐ Other _____

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(Check one)

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☐ **Schedule A-1 - Investments** – schedule attached

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☐ **Schedule E - Income – Gifts – Travel Payments** – schedule attached

-or-

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NAME OF FILER (LAST) (FIRST) (MIDDLE)
JOHNSON BEN

1. Office, Agency, or Court

Agency Name

EAST CONTRA COSTA COUNTY HABITAT CONSERVANCY (HCP) JPA

Division, Board, Department, District, if applicable

BOARD

Your Position

2ND ALTERNATE MEMBER

► If filing for multiple positions, list below or on an attachment.

Agency: _____ Position: _____

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☐ Multi-County _____

☒ County of CONTRA COSTA

☒ City of PITTSBURG

☒ Other _____

3. Type of Statement (Check at least one box)

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☐ Leaving Office: Date Left ____/____/____
(Check one)

-or-

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☐ The period covered is ____/____/____, through the date of leaving office.

☐ Candidate: Election year _____ and office sought, if different than Part 1: _____

4. Schedule Summary

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► Total number of pages including this cover page: _____

☐ Schedule A-1 - Investments - schedule attached

☐ Schedule C - Income, Loans, & Business Positions - schedule attached

☐ Schedule A-2 - Investments - schedule attached

☐ Schedule D - Income - Gifts - schedule attached

☒ Schedule B - Real Property - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

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Date Signed 03/26/2013

(month, day, year)

SCHEDULE B
Interests in Real Property
(Including Rental Income)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

BEN JOHNSON

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

161 YOSEMITE DR

CITY

PITTSBURG, CA 94565

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☒ \$100,001 - \$1,000,000
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/12 ____/____/12
ACQUIRED DISPOSED

NATURE OF INTEREST

☒ Ownership/Deed of Trust ☐ Easement

☐ Leasehold _____
Yrs. remaining Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

- ☐ \$0 - \$499 ☐ \$500 - \$1,000 ☒ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

☐ None

ROBERT RODRIGUEZ

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

1120 LAUREL ST

CITY

PITTSBURG, CA 94565

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000
☒ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/12 ____/____/12
ACQUIRED DISPOSED

NATURE OF INTEREST

☒ Ownership/Deed of Trust ☐ Easement

☐ Leasehold _____
Yrs. remaining Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

- ☐ \$0 - \$499 ☐ \$500 - \$1,000 ☒ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

☐ None

MARLENE BIDDLE

* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ASC

ADDRESS (Business Address Acceptable)

POBOX 4006 LA, CA

BUSINESS ACTIVITY, IF ANY, OF LENDER

FINANCIAL INSTITUTION

INTEREST RATE

8 _____% ☐ None

TERM (Months/Years)

360

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☒ OVER \$100,000

☐ Guarantor, if applicable

NAME OF LENDER*

SIINO FAMILY TRUST

ADDRESS (Business Address Acceptable)

290 E. 18TH ST ANTIOCH, CA 94530

BUSINESS ACTIVITY, IF ANY, OF LENDER

PRIVATE LENDER

INTEREST RATE

7 _____% ☐ None

TERM (Months/Years)

360

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☒ \$10,001 - \$100,000 ☐ OVER \$100,000

☐ Guarantor, if applicable

Comments: _____